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Intellectual Property Law

JAN 1 2 2007

From the Desk of LUKE A. KILYK*

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FACSIMILE TRANSMISSION COVER SHEET

DATE:

January 12, 2007

TO:

Examiner Maury A. Audet

Group Art Unit 1654 Mail Stop Amendment Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

RE:

U.S. Patent Application No. 10/602,035

For: METHODS FOR PREVENTING ADHESION FORMATION

19

USING PROTEASE INHIBITORS

Our Ref.: CPR-00101.P.1-US (3190-104)

FROM:

Luke A. Kilyk, Eso.

FAC. TEL. NO.:

1-571-273-8300

NUMBER OF PAGES (INCLUDING THIS COVER SHEET):

Items Attached: Amendment - 14 pages

Petition for 2-month Extension of Time -- 1 page

Fee Transmittal - 1 page

Credit Card Payment Form - 1 page

Revocation of Power of Attorney with New Power of Attorney

and Change of Correspondence Address -- 1 page

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Kim Blum Name

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Approved for use through 07/31/2006. OMB 0651-0032
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				Complete if Known				
FEE TRANSMITTAL			Application Number 10/602,035					
			Filing Date			June 23, 2003		
for FY 2007			First Named Inventor		ventor	Mizuo Miyazaki		
Effective 10/01/2003. Patent fees are subject to ennual revision.			Examiner Name		e	Maury A. Audet		
Applicant Claims small entity status. See 37 CFR 1.27			Art Unit			1654		
TOTAL AMOUNT OF PAYMENT (\$) 275.00			Attorney Docket No.		t No.	CPR-00101.P.1-US (3190-104)		104)
METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)						
Check X Credit card Money Other None	3. ADDITIONAL FEES							
X Deposit Account	Large Fee	Entity	Small	Entity Fee		Fee Description		Fee Paid
Deposit	Code	(\$)	Code	(\$)		•		Fee Falu
Account Number 50-0925	1051	130	2051	65	Surcha	rge - late filing fee or oath		,
Deposit Account Name Kilyk & Bowersox, P.L.L.C.	1052	50	2052	25	Surcha cover	rge – late provisional filing fee sheet	or	
The Director is authorized to: (check all that apply)	1053	130	1053	130	30 Non-English specification			
Charge fee(s) indicated below X Credit any overpayments	1812	2,520	1812	2,520		r filing a request for ex parte reexamination		
X Charge any additional fee(s) or any underpayment of fee(s)	1804	920*	1804	920*	Examir	sting publication of SIR prior to ner action		
Charge fee(s) indicated below, except for the filling fee to the above-identified deposit account.	1805	1,840*	1805	1,840*		sting publication of SIR after ner action		
FEE CALCULATION	1251	120	2251	60	Extens	ion for reply within first month		
1. BASIC FILING FEE	1252	450	2252	225	Extens	ion for reply within second mon	nth	225.00
Large Entity Small Entity	1253	1020	2253	510	Extens	ion for reply within third month	,	
Fee Fee Fee Fee Description Fee Paid Code (\$)	1254	1590	2254	795		ion for reply within fourth month	h	
1011 300 2011 150 Utility filing fee	1255	2160	2255	1080		ion for reply within fifth month		
1012 200 2012 100 Design filing fee	1401 1402	500 500	2401	250 250		of Appeal brief in support of an appeal		
1013 200 2013 100 Plant filling fee 1014 300 2014 150 Reissue filing fee	1403	1000	2402	500		of for oral hearing		
1005 200 2005 100 Provisional filing fee	1451	1510	1451	1,510	-	to institute a public use proces	eding	
	1452	500	2452	250		fitton to revive – unavoidable		
SUBTOTAL (1) (\$) 0.00	1453 1501	1500	2453	750		on to revive – unintentional		
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1502	1400	2501 2502	700 400		issue fee (or reissue)		
Extra Claims below Fee Paid Total Claims 36 34** 2 x 25.00 = 50.00		1100				issue fee		
Independent 2000 X	1503 1460	130	2503 1460	550 130		sue fee is to the Commissioner		
Claims Multiple Dependent	1807	50	1807	50		sing fee for provisional applicat	tions	
Large Entity Small Entity	1806	180	1806	180		sion of Information Disclosure		
Fee Fee Fee Fee Code (\$) Code (\$) Fee Description	8021	40	8021	40	Record	ing each patent assignment pe	ır	
1202 60 2202 25 Claims in excess of 20	1809	790	2809	395	Filing a	(times number of properties) submission after final rejection R 1.129(a))	1	
1201 · 200 2201 100 Independent chalms in excess of 3	1810	790	2810	395	For eac	th additional invention to be ed (37 CFR 1.129(b))		
1203 360 2203 180 Multiple dependent claim, if not paid	1801	790	2801	395		t for Continued Examination (RCI	E)	
1204 200 2204 100 **Reissue independent claims over original patent	1802	900	1802	900		at for expedited examination sign application		
1205 50 2205 25 "Relssue claims in excess of 20 and over original patent								
SUBTOTAL (2) (\$) 50.00 Ott			r fee (specify)					
or number previously paid, if greater, For Relssues, see above	Reduc	ed by Bas	ic Filing Fee Paid			SUBTOTAL (3) (\$) 225.00		0
SUBMITTED BY Complete (if applicable)								
Name (Print/Type) Luke A. Kilyk		istration N orney/Agen		33,251	ì .	Telephone	1-540-4	
Signature The Carly Information on the form			<u> </u>			Date	January 1	2,2007

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Kim Blum	Kin Blum	
Name (Print)	Signature	